

**MONTGOMERY COUNTY COMMISSION ON HEALTH**

Meeting Minutes  
Annual Retreat  
October 20, 2016  
701 King Farm Blvd., Rockville, Maryland 20850

Members Present: Mitchell Berger, Brenda Brooks, Marla Caplon, Ilana Cohen, Maya Das, Michelle Hawkins, Lenna Israbian-Jamgochian, Graciela Jaschek, Alan Kaplan, Kathy Mann Koepke, Pierre Marie Longkeng, Rose Marie Martinez, Linda McMillan, Susan Milstein, Sheela Modin, Daniel Russ, Tonya Saffer, Fabienne Santel, Ulder Tillman, and Bridget Ware.

Members Absent: Ron Bialek, Stacey Burton Dey Foy, and Wayne Swann.

Staff Present: Helen Lettlow, Ellen Segal, and Robyn Simmons.

Guest Speakers: Bonnie Braun, Dourakine Rosarion, Karen Thompkins, and Howard University Students.

Student Attendees: Howard University School of Nursing Students

**1.0 Call to Order and Welcome**

- Chair Daniel Russ called the annual retreat to order at 3:43 p.m.
- Ms. Christine Podles, Executive Director of Ingleside at King Farm, welcomed everyone to Ingleside.
- The COH Commissioners, visitors and speakers introduced themselves.

**2.0 COH Minutes and Next Meetings**

- **Approval of Minutes** – A motion to approve the September 2016 minutes was made by Lenna Israbian-Jamgochian and seconded by Mitchell Berger. The minutes were approved unanimously by voiced consent.  
**Next Meetings** – The next COH meeting will be Thursday, November 17, 2016 at 6:00 p.m. at **MCPS Division of Food and Nutrition Services located at 8401 Turkey Thicket Drive, Gaithersburg, MD 20879.**

**3.0 Chair Updates**

- Chair Daniel Russ presented Commissioner Rose Marie Martinez with a Certificate of Appreciation in recognition of two terms of service (6 years) on the COH. The Commission wishes her luck on her next endeavors.
- Dan Russ reported on several recent boards, committees and commissions (BCC) meetings:
  - Quarterly Meeting with the DHHS Director 9/28/16.
    - A COH statement of issues and accomplishments was provided for the meeting, At this meeting the BCCs agreed on housing as the combined priority for all the BCCs that would be presented to the Council's HHS committee.
  - Advocacy Training 9/28/16

- Council Bill 35-17 amended the enabling legislation of certain BCCs including COH to provide the ability to advocate at the State and Federal Levels. However, a condition for such advocacy is providing necessary information in advance to the County's Office of Intergovernmental Affairs and receiving their approval.
- Testimony to County Council sitting as the Board of Health 10/14/16
  - Commissioner Pierre-Marie Longkeng presented the COH priorities.
- Council HHS Committee Breakfast 10/19/16
  - Chair Daniel Russ testified on behalf of COH stating the COH priorities of Health Literacy, Men's Health, and Obesity.

#### **4.0 Chief's Report – Dr. Ulder J. Tillman addressed highlights from the September 2016 report (included in the meeting packet).**

- School Health Services is collaborating with the Child Welfare Services Program to provide essential health care services to children in foster care. Services will be provided in 13 School-Based Health and Wellness Centers throughout the County.
- The Refugee Health Program is now closed. An HIV Physician, Community Service Aide and roving team nurse are temporarily providing care for follow up visits that were previously scheduled and data entry for September 2016 reimbursements. The TB Program will work with CCI regarding continued referral of Class B refugees and asylees who live in Montgomery County.
- The Nadim Khan Memorial Homeless Resource Day is Thursday, November 17, 2016 from 9:00 a.m. to 3:00 p.m. at Bohrer Park, 506 South Frederick Ave., Gaithersburg, MD 20877.

#### **5.0 Guest Presentations**

- **Orientation to Smart Choice & Smart Choice Health Insurance™**

**Speaker: Bonnie Braun, PhD, University of Maryland School of Public Health/UMD Extension Health Literacy Initiative**

- Dr. Braun presented on Smart Choice and Smart Choice Health Insurance. This program was developed and implemented to improve health literacy.
- The program is customized for targeted populations.
- Key points addressed in the program are: deductibles, roles health professionals can do to fill the gaps, ways to make health insurance easier to understand, how to know if it is working, and financial literacy.
- A Smart Choice consumer workbook was created to help define problems and perimeters that should be set for the purchase of health insurance. This goes over everything from number of doctors' visits per year to monthly spending plans.
- Smart Actions for Using Your Health Insurance is a training segment used to educate the public on using the health insurance. It covers various topics including: reviewing the evidence of coverage; use of preventive services to stay healthy, choosing in-network doctors, and planning for health care costs. Dr. Braun is encouraged participation in the upcoming Smart Use-Smart Actions webinar workshop and training for professionals. The training is \$25.00 plus \$2.75 processing fee and takes place November 29, 2016 from 1:00 p.m. to 4:30 p.m.

- **Healthy Montgomery Community Health Needs Assessment**

**Speaker: Karen Thompkins, MPH, Healthy Montgomery, Montgomery County DHHS**

- Karen Thompkins presented on the Community Health Needs Assessment (CHNA). The purpose of the CHNA was to gather and review data to assess the health status of the community. The Assessment looked at resources available to the community, access to these resources, qualitative and quantitative data, and evidence based strategies.
- Community conversations for the CHNA took place May through October of 2015.

- Lessons learned:
  - Residents of Montgomery have access to many health care resources; both from government and private organizations.
  - Services need to be easier to access by addressing barriers such as underlying factors like disabilities, cost, culture, language and transportation.
  - Health needs to be considered in all decision-making policies.
- Healthy Montgomery is working on priority setting; to achieve its objectives over a three-year period, from 2017 to 2019.
- There were 10 key strategies of “what we can do”, which included:
- Create a Health in All Policies Model for Montgomery County;
- Offer diet and physical activity programs for people at risk for type 2 diabetes; and,
- Connect people with key resources in the community; among others.
- Voted in for Healthy Montgomery Priority Setting was Health in all policies; integrating Behavioral Health programs in Primary Care settings; and, combined diet and physical activity promotion programs.
- Healthy Montgomery will continue to develop CHNA materials for dissemination to the community, revisit 15 community conversation groups, work on rapid action planning for each of the three priority areas, develop Community Health Improvement Plan (CHIP) and implement the CHIP between 2017 and 2019.

## 6.0 COH Workgroups

- Workgroups met to determine the chair, identify FY17 goals and objectives and discuss an initial work plan. Dr. Michelle Hawkins provided a wrap up statement and a brief summary was provided by each work group:
  - Obesity - Chair Maya Das, Vice Chair: Lenna Israbian-Jamgochian  
Goals/Objectives: Adolescent nutrition and activity, school meals, activities for middle and high school students, and walkability.
  - Insurance Health Literacy Group – Chair: Tonya Saffer, Vice Chair: Michelle Hawkins  
Goals/Objectives: Starting recommendation is to incorporate Smart Choice Program into County health programs.
  - Men’s Health – Chair: Susan Milstein, Vice Chair: Fabienne Santel  
Goals/Objectives: Focus on Men’s Health Month (June). Is interested in sending out information and support letters to County Council to raise awareness and obtain a proclamation.

## 7.0 Retreat Evaluation – Robyn Simmons, COH Staff

A brief anonymous survey to collect feedback on the retreat has been developed by COH Vice-Chair Mitchell Berger. The results will help in planning future COH retreats.

- **ACTION:** A link to the survey via Survey Monkey will be sent this week. Commissioners should complete it as soon as possible because the responses will be discussed at the November meeting.

## 8.0 Motion to Adjourn

- The meeting was adjourned at 7:59 p.m.

Respectfully Submitted:

Helen Lettlow  
Commission on Health

**Public Health Services  
Chief's Report  
September, 2016**

**SUCSESSES AND GOOD NEWS**

- Community Health Services has finalized its new Home Visiting Case Management Model. The new model will consist of a Community Health Nurse/Community Service Aide team that will be assigned to clients geographically by zip code. The CSAs will have a major role in providing home visits and care coordination services to lower risk pregnant women. The ultimate goal is to create a Community Service Aide home visiting curriculum in preparation for a Community Health Worker State certification which will strengthen partnerships and facilitate potential opportunities for future reimbursement by Medical Assistance. This model is also a beginning phase of aligning the program to become an evidenced based home visiting model.
- NACCHO is planning a joint webinar with MenuTrinfo about the new national menu labeling requirements and compliance with the FDA regulations. NACCHO reached out to L&R and is interested in our team speaking on the topic during the webinar due to the experience with regards to the previous challenges we faced with the implementation of the Montgomery County menu labeling bill in 2010. The webinar is still preliminary but is slated to be held sometime in November.

**HOT SPOTS**

- Bethesda's rat problem continues in the Woodmont triangle area. Licensing and Regulatory is working with the Department of General Services to mitigate this with business owners.
- Executive Regulation 14-14 regarding smoking passed by Board of Health.
- L&R participated in the Short Term Residential Rental ZTA Community Forum at the Maryland National Parks and Planning Commission on September 19th. Heard from citizens that are both for and against Air BnB and other public platforms regarding short term rentals. MNPPC is trying to present council with a viable resolution for amending the zoning requirements for allowance of short term rentals in residential areas of the county with limitations to appease both sides.

**UPDATES ON KEY ISSUES**

**School Health**

- School Health Services is collaborating with the Child Welfare Service Program to provide essential health care services to children in foster care. These services will be provided at the 13 School-Based Health and Wellness Centers located throughout the County starting on October 17, 2016.
- At the end of August, there were still 2,308 seventh, eighth and ninth grade students without proof of the required Tdap/MCV immunizations. These vaccines are a State requirement that all 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> graders must receive in order to attend school. In partnership with Montgomery County Public Schools, MCDHHS staff worked to meet the COMAR immunization requirements by opening and operating multiple clinics at schools, Silver Spring and Germantown Health Centers, International Student Admissions Office (ISAO) and Dennis Avenue. As of October 5<sup>th</sup>, 22 students still did not have proof of immunizations and are being excluded from school.

**Immunization Program**

- The Immunization Program's staff provided logistic support, vaccine management, and staffing support during the State mandated 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> graders Back to School initiative. Clinics were held at nine different middle schools on September 13, 14 and 15, 2016. The IZ clinic provided walk-in vaccinations services during the first month schools were in session.

### Refugee Health

- Refugee Health Program closed on Friday, September 30, 2016. HIV Physician, Community Service Aide and roving team nurse are temporarily providing care for follow up visits that were previously scheduled and data entry for September 2016 reimbursements. TB Program will work with CCI regarding continued referral of Class B refugees and asylees (i.e., those needing TB follow-up) who live in Montgomery County.

### Tuberculosis Control

- Currently 54 TB disease cases (including 7 pending report to CDC).
- Received sensitivities for Multi Drug Resistant TB case. Initiation of treatment is pending TB physician assessment and orders planned for this week. Nurse Administrator will request medications from DHMH TB Program.
- SCG nursing home contact Study- in progress; first round completed and second round is pending.
- Kennedy HS Contact Study- in progress; results still coming in from the laboratory.

### Disease Control

- In the month of September, Disease Control (DC) staff approved Zika testing for 70 county residents; 3 had confirmed Zika disease prompting 3 Aedes Mosquito Responses, for a total 132+ residences. Ultra-low Volume fogging was not indicated. 50 pregnant women tested for Zika; 7 were symptomatic. Case management continued for 3 Zika babies born in August; as well as any pregnant woman who tests equivocal (not positive or negative).
- In September, DC received a re-assigned nurse from SHS who was trained to perform intake for Zika cases from health care providers in the community; this help allowed other DC nurses to investigate foodborne illness and aseptic meningitis investigations that had been on hold. 40 confirmed cases of Campylobacter and Salmonella, 12 cases of Giardia, and 12 Aseptic Meningitis cases were investigated. Additionally, DC nurses investigated 2 outbreaks of Campylobacter and [Clostridium Difficile](#) in assisted living facilities and a pertussis outbreak at a pediatric clinic.
- DC nurses were also very busy in August investigating 34 animal bites, as well as coordinating animal rabies testing with Animal Services for 20 animals of which one fox and 3 bats tested positive for Rabies.
- DC nurse administrator responded to numerous after-hours calls from urgent-care centers, walk-in clinics, and emergency rooms related to Zika, rabies, measles, and varicella. She also attended an International Zika Conference.

### HIV Program

- The Housing Opportunities for Persons with AIDS (HOPWA) Program has reached capacity. Currently HOPWA is subsidizing 60 long term housing units. While this housing program is currently at capacity, we do have funds available from other sources for shorter term and more urgent situations.

### Care for Kids

- Care for Kids Program has higher enrollment in this first quarter than the first quarter of last fiscal year. Like last fiscal year, this may be reflecting the number of children fleeing violence that are coming into the County.

### Dental

- The Montgomery County Dental Program had an interesting in-service training on cultural competency for the whole staff and dental providers. The focus of the training was on information and tools that help staff and providers better serve people from all kinds of backgrounds.

- In order to continue the implementation of the Family-Centered model for our County Dental Clinics, and provide the same access to oral health services for all the populations we serve (children, maternity, seniors and adults), we have recently implemented an internal policy change by eliminating the three visit limit for the adult population.

#### Maternity Partnership

- Maternity Partnership Program's FY17 enrollment year to date is slightly lower than the same period in FY16. This goes against the trend of increasing enrollment observed in FY15 and FY16. It is too soon to tell whether this is the beginning of a new trend or an anomaly.

#### Montgomery Cares

- The People's Community Wellness Center will be closing its clinic in the East County Regional Services Center by the end of the calendar year. Mobile Medical Care will continue to provide services to Montgomery Cares patients in that clinic space, which they have shared with Peoples on alternate days and evenings for the past six years. The People's Community Wellness Center, DHHS, PCC and Mobile Medical Care are collaborating to assure a smooth and fairly seamless transition of patients to Mobile Medical Care or other Montgomery Cares clinics, according to the patient's choice.

#### Healthcare for the Homeless

- Mark your calendars for our annual Homeless Resource Day -- November 17<sup>th</sup>. Healthcare for the Homeless (HCH) has taken an active part in the gathering statistical data on homeless clients with chronic medical and psychiatric conditions. This is a major effort through the Interagency Commission on Homelessness Hospital & Jail Committee to provide the Continuum of Care with supporting data for why Montgomery County has a growing need for a medical respite program/recuperative care program. All surrounding County hospitals, community providers and HCH are working together as a team to collect the data during the months of August & September.

### STATISTICS

|  |               |
|--|---------------|
| <b>Program: Environmental Health Services</b>  | <b>Sep-16</b> |
| Number of COMAR mandated food service facilities inspections completed by L&R  | 488           |
| YTD number of COMAR mandated food service facilities inspections completed   | 1014          |
| Number of expected food service facilities inspections to be completed in Montgomery County as mandated by COMAR regulations | 697           |
| YTD number of expected mandated inspections to be completed  | 2092          |
| Number of food service facilities NOT having a critical violation upon routine inspection                                    | 143           |
| YTD number of food service facilities NOT having a critical violation upon routine inspection                                | 283           |
| Number of completed swimming pools inspections   | 74            |
| YTD number of completed swimming pools inspections   | 1837          |
| <b>Program: Healthcare Services</b>  | <b>Sep-16</b> |

|  |               |
|--|---------------|
| Number of nursing homes with actual harm deficiencies  | 0             |
| YTD number of nursing homes with actual harm deficiencies  | 4             |
| Number of nursing homes  | 34            |
| <b>Program: Health Room</b>  | <b>Sep-16</b> |
| Number of visits by students who return to class after and are ready to learn following health room intervention | 33657         |
| Number of visits by students with a health room intervention   | 37932         |
| <b>Program: SBH/WC</b>   | <b>Sep-16</b> |
| Number of visits each month to the School Based Health and Wellness Centers (non-cumulative)                     | 784           |
| Number of clients enrolled in the School Based Health and Wellness Centers (cumulative)                          | 7706          |
| <b>Program: International Student Admissions Office (ISAO)</b>   | <b>Sep-16</b> |
| Number of VFC vaccinations administered  | 2020          |
| Number of VFC vaccinations administered to uninsured clients   | 1631          |
| <b>Program: Maternity Partnerships</b>   | <b>Aug-16</b> |
| Number of patients referred to hospitals by DHHS   | 149           |
| YTD Patients   | 301           |
| New patients enrolled in prenatal care by hospitals  | 147           |
| YTD Patients   | <b>299</b>    |
| Number of teens enrolled   | 11            |
| YTD teen enrollment  | 24            |
| # of first trimester entries into Maternity Partnership for <u>each month</u> .                                  | 60            |
| Percent of patients with entry during first trimester YTD  | 43%           |
| Number of patients with entry during first trimester YTD   | 130           |
| Fetal losses   | 2             |
| YTD fetal losses   | 3             |
| <b>Program: Dental Health</b>  | <b>Aug-16</b> |
| <b>Maternity:</b>  |               |
| New patients   | 182           |
| YTD patients   | 364           |
| Encounters   | 197           |
| YTD Encounters   | 384           |
| <b>Children:</b>   |               |
| New patients   | 390           |
| YTD patients   | 612           |
| Encounters   | 337           |
| YTD Encounters   | 587           |
| <b>Adults:</b>   |               |
| New patients   | 266           |
| YTD patients   | 479           |
| Encounters   | 301           |

|   |               |
|---|---------------|
| YTD Encounters  | 526           |
| <b><i>Seniors:</i></b>  |               |
| New patients  | 166           |
| YTD patients  | 241           |
| Encounters  | 192           |
| YTD Encounters  | 273           |
| <b><i>TOTAL:</i></b>  |               |
| New patients  | 1004          |
| YTD patients  | 1696          |
| Encounters  | 1027          |
| YTD Encounters  | 1770          |
| <b>Program: Infants at Risk (IAR)</b>   | <b>Sep-16</b> |
| # of Infant at Risk (IAR) referrals received from hospital or provider                                      | 7             |
| YTD Number  | 42            |
| # of referrals received from DHMH or providers for children lead levels>10ug/dl                             | 4             |
| YTD Number  | 15            |
| <b>Program: Maternity Partnership</b>   | <b>Sep-16</b> |
| Number of adolescents up to 18 years of age referred to Community Health Services by School Health Services | 6             |
| YTD Number  | 8             |
| Number of adolescents up to 18 years of age referred to Community Health Services by DACCT                  | 4             |
| YTD Number  | 23            |